CITY OF MARIETTA - APPLICATION FOR FILM PERMIT

Mailing Address: PO Box 609 Marietta, GA 30061 Phone: 770.794.5605 Shipping Address: 205 Lawrence Street Marietta, GA 30060 FAX: 770.794.5635

LOW IMPACT FILM APPLICAT	ΓΙΟΝ FOR OF	FICE USE ONLY	
The information below is a request for create undue hardship for you, please (Ex	contact the city's film perm		
HIGH IMPACT FILM APPLICA	TION		
The information below is a request for department that go above and beyo determine if this request can be handle	nd those generally provic	ded. Please review the request an	
Company	Film		
Address			
ontact Person Office Phone			
Fax	Pager		
Mobile Phone		E-ma	
Type: Feature Film TV N Other			
Location			
Film date(s)			
Prep/wrap outside listed time? No _	Yes	If yes, see page 2.	
In case of foul weather	or other emerg	gency, film date will b	
Describe scene:			

Number in cast	Crew	_ Extras			
Street Closure location	n(s)				
Equipment parking lo	cation(s)				
Base camp location(s)	1				
Catering truck locatio					
Crew location(s)					parking
Extras' parking location	on(s)				
Other on-street parkin	g location(s)				
Police Officers: Amt.	Hours _	to	Amt	Hours	_to
Vehicular	traffic	control		requested	at
Pedestrian traffic cont	rol requested at	;			
Special equipment and	d placement at _				
Special situations/effe	ects (stunts, anin	nals, gunfire, noise	e, etc		
Special requests (hydr	ant meter, alter	ation to city prope	rty, etc.)		
Additional informat	tion (include	any prep and	d wrap a	activities, tim	es, parking)
OFFICE USE ONLY	DESCRIPTION		FEEE	DATE	DECEIDT #
PERMITS	DESCRIPTION		FEES	DATE RECEIVED	RECEIPT #
APPLICATION FEE			\$25.00		
USE OF CITY PROPERTY	(\$250 minimum))			
CITY SERVICES					
CITY SERVICES					
CITY SERVICES					

OTHER

OTHER		
TOTAL		